Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information under the PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									Application or Docket Number			
CLAIMS AS FILED - PART I 4-11-05 (Cotumn 1) (Cotumn 2) SMALL ENTITY									OR	OTHER THAN OR SMALL ENTITY		
	FOR		RFLED	MUMBE	R EXTRA		RATE	FEE		RATE	FEE	
8ASIC FEE (37 CFR 1.16(a))							5	OR		5		
	L CLABAS FR 1.16(c))		minus &	<u>'.</u> ·			x \$=		OR	x s=		
	PENDENT CLAIM FR 1.16(b))	48	minus 3				x 5=		OR	x s=		
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						+1_ =		OR	+5 =			
" If the difference in column 1 is less than zero, enter "O" in column 2.							TOTAL		OR	TOTAL		
									,			
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL I	ENTITY	OR		R THAN ENTITY	
V ⊢		CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATL	1001- TIONAL	
ME	Total profestate(c))	* 45	Minus	"51	-U	┞	*** /*		OR	X 3 =	-	
AMENDMENT	Independent Q7 CFR 1,15(0))	· 17	Minus	- 7	- 24	1	X 5 =		1	X 5 =	600	
AME		ATION OF MULTIPLE	DEPENDE	MACHINA DICE	8 1 1660)				OR OR		2	
\vdash	TROTTRESER					1	TOTAL		1	TOTAL	(1)	
							ADO'L FEE	l	OR	ADD'L FEE		
	7.	(Column 1) CLAIMS		(Column 2) HIGHEST	(Column 3)	1	<u> </u>		}			
ENDMENT B	10/12/05	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
OM O	Total prersusson	. 24	Minus	<u></u> 35	-	ļ	y : e		OR	x s=		
EN EN	Ind-spendent Q1 CFR 1.15(6))	' 11	Mirus	<u>" </u>	=		x:_=	*	OR	x s_		
AM	FIRST PRESENT	ATION OF MULTIPU	E DEPENDS	ENT CLAIM (37 CF	R 1.16(d))	┝	+3=		OR	+ \$=		
•							ADD'L FEE		OR	TOTAL ADD'L FEE		
		(Column 1)		(Column 2)	(Column 3)	٠		,	,			
NTC		CLAIMS REMAINING AFTER AFE-TRAFET		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MENT	Dr.Cra i sqeg	[l.'inus	-	-	1	x \$ =		OR	x 1=		
AMENC	Independent profession	<u> </u>	Minus		-	1	x \$=		OR	X 1=		
AM	FIRST PRESENT	TATION OF MULTIPL	E DEPEND	ENT CLAIM (37 CI	R 1.16(d))	1	+\$ =		OR	+; =		
	I					J	TOTAL 7001,FEC		0.7	TOTAL ADD'L 19E	1	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".												

The Tilectest Number Freedously Pald For [Total or Independent] is the history number found in the appropriate born in column 1.

This codection of internation is required by 37 CFR 1.15. The Information is required to obtain or retain a benefit by the number which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Palent and Trademark Office, U.S. Department of Commono, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Palents, P.O. Box 1450, Alexandria, VA 22313-1450.